

Project Name: Innovations in Family Planning Services, Phase II (IFPS II)
Agreement Type: Bi-lateral
Duration: IFPS 1992-2008 (Phase II began in 2004)
Geographic Scope: Uttar Pradesh, Uttaranchal, Jharkhand
UP: State Innovations in Family Planning Services Agency (SIFPSA); Uttaranchal: Uttaranchal Health and Family Welfare Society (UAHFWS); Jharkhand: Jharkhand Health Society (JHS)
Technical Assistance Agencies: Society (UAHFWS); Jharkhand: Jharkhand Health Society (JHS)
Implementing Agency: Innovations in Family Planning Services, Phase II (IFPS II)

DESCRIPTION:

Phase Two of the Innovations in Family Planning Services Project (IFPS II) focuses USAID/India's support for reproductive and child health (RCH) activities on developing, demonstrating, documenting and leveraging expansion of public-private partnerships for provision of high quality reproductive and child health services in three states of northern India (Uttar Pradesh, Uttaranchal and Jharkhand).

KEY ACTIVITIES:

- Expanding access to reproductive and child health commodities and services in both urban and rural areas through public-private partnership mechanisms;
- Demonstrating new models of community based RCH service delivery, linked to clinical services;
- Developing a social franchise network for provision of RCH services;
- Conducting behavior change communication campaigns;
- Assisting the implementation of the ASHA scheme in areas of difficult terrain;
- Supporting new approaches to mobile health services in difficult terrain areas;
- Supporting implementation of the Rural Health Missions in each of the three states.

Through demonstration of proven interventions for scale up, capacity building and resource leveraging, IFPS II continues to build upon the achievements of IFPS I (1992-2003).

IFPS I Key Achievements (1992-2003)

- Modern contraceptive prevalence in the project area of UP increased from 18% to 27% which was nearly twice the rate of increase in non-project areas of the state. (the project areas are home to 94 million people)
- Nearly 600,000 additional women became users of family planning spacing methods, nearly double that of the baseline level. This achievement boosted the overall users of modern family planning to 3.9 million women.
- The CPR in districts where IFPS/SIFPSA was supporting community-based workers increased to 30% in comparison to other districts where CPR remained at 22%. These districts reach 13 million people.

IFPS II Key Achievements (2003-2008)

- Between 2003 and 2005, use of modern contraceptives throughout Uttar Pradesh increased at its fastest rate ever, from 24.6 to 26.7 percent—an increase of more than a percentage point each year; and
- In 2005, condoms and pills were available in more small villages in rural Uttar Pradesh than ever before: 56 percent of villages had an outlet selling both pills and condoms compared to just 19 percent in 2000.
- IFPS made significant contributions to the formulation of the new GoI RCH II Program Implementation Plan (PIP) which is used to define a comprehensive set of health activities to be implemented statewide. The health activities under these PIPs are being implemented in all districts through decentralized district action plans which also have been prepared with technical assistance from IFPS.

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Jharkhand: Mr. D.K. Saxena, Executive Director, Jharkhand Health Society, RCH Office, Namkum, Ranchi, Tel: 91-651 – 2261000, Fax: 91- 0651-2260361

Project Name: IFPS II Technical Assistance Project (ITAP)
Agreement Type: Task Order under IFPS bi-lateral agreement
Duration: 2004-2008, with option to extend based on performance
 Uttar Pradesh, Uttaranchal, Jharkhand and select National level
Geographic Scope: activities
 Constella/Futures (subcontractors include Bearing Point,
Technical Assistance Agencies: JHU/HCP, QED Group and the Urban Institute)
Implementing Agency: IFPS II Technical Assistance Project (ITAP)

DESCRIPTION:

The IFPS II Technical Assistance Project (ITAP) supports the bilateral IFPS II project in state activities as well as a National Health Systems Resource Center (NHSRC) for support of national level activities. ITAP provides technical support for developing, demonstrating, documenting and leveraging expansion of public-private partnerships for provision of high quality reproductive and child health services in three states of northern India (Uttar Pradesh, Uttaranchal and Jharkhand).

KEY ACTIVITIES:

- Supporting development of public-private partnership activities by the state governments;
- Building capacity of state societies to address health issues and implement state health projects;
- Providing technical assistance for other donor agency activities in focal areas;
- Documenting processes, lessons learned and impact of program interventions;
- Supporting the National Health Systems Resource Center; and
- Assisting development of communication strategies and mass media materials.

KEY ACHIEVEMENTS:

- Played a key capacity building role in state society implementation of RH/FP activities totaling more than \$3.5 million.
- Leveraged millions of dollars worth of celebrity appearance fees in support of Rural Health Mission launches in Uttar Pradesh and Uttaranchal and also at the national level;
- Conducted the 2005 Reproductive Health Indicator Survey, a statewide effort documenting Uttar Pradesh's reproductive health indicators;
- Assisted the Uttar Pradesh State AIDS Control Society in preparing the State Project Implementation Plan for HIV/AIDS;
- Collaborated with the Uttar Pradesh Health Systems Development Project (HSDP) for development of District Action Plans for four districts in UP.
- Developed road map for social franchising in focal states together with national and international experts.
- Appraised RCH II State PIPs and created a database for MOHFW.
- Prepared various documents for the MOHFW, such as Manual on Quality Assurance for Sterilization Services, Advocacy and Community Mobilization for increasing No-Scalpel Vasectomy Acceptance through Camps, supported IPHS development for Sub Centers, PHC, District Hospitals, etc.

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Project Name: Frontiers in Reproductive Health (FRONTIERS)
Agreement Type: Field Support (Cooperative Agreement)
Duration: 1998-2008
Geographic Scope: Global (India is a priority country)
Technical Assistance Agencies: Population Council (PC), Family Health International (FHI)
Implementing Agency: Employees State Insurance Corporation (ESIC), Government of Gujarat and Maharashtra, Vadodara Municipal Corporation, PRC Vadodara, CARE India, Indian Council of Medical Research and its three HRRCs, International Institute of Population Studies (IIPS), Meerut Medical College and Government of Uttar Pradesh, UNFPA and MOH, GOI, Jamia Millia Islamia University, New Delhi

DESCRIPTION:

FRONTIERS applies systematic research techniques to improve delivery of family planning and reproductive health (RH) services and influence related policies. It conducts operations research (OR) to find practical solutions to service delivery problems associated with accessibility, availability, quality, and costs of care to health systems and clients. The expected results of FRONTIERS are:

- Innovative solutions to global and regional RH service delivery problems experimentally developed and tested;
- The results of research disseminated and used to improve policy development and program management; and,
- The capacity of decision makers to produce and use operations research enhanced to ensure the sustainability.

KEY ACTIVITIES:

- In collaboration with Meerut Medical College and district authorities, OR has been initiated to test opportunities for increasing birth intervals. This OR focuses on Lactation Amenorrhea Method (LAM) and postpartum contraception.
- In collaboration with Gujarat Government and Vadodara Municipal Corporation, OR is being carried out to increase demand of IUD. The major thrust is on BCC, balanced counseling and enhanced access to IUD.
- OR study in Gujarat and Maharashtra demonstrated that Quality Assurance (QA) measures could be institutionalized at district level management. It is now being institutionalized in all the 25 districts of Gujarat and will be piloted in six additional states for eventual scale up nationwide.
- Successfully tested and demonstrated the use of systematic screening instrument (SSI) to increase provision of RH services. The SSI is now being scaled-up to all clinics of Vadodara Municipal Corporation and 40 PHCs of Gujarat, with possible scale up to Uttaranchal.
- Successfully tested an innovative approach to male involvement in maternity care in 3 clinics and expanded it to 20 ESIC health facilities in Delhi.
- Established a gender working group and a website. Efforts are being made to bring gender and gender-based violence (GBV) as cross-cutting issues of all health and developmental programs.

KEY ACHIEVEMENTS:

- Successful demonstration through OR has led to the following scaled up activities:
 - Male involvement in maternity care services of ESIC. (Partner: ESIC)
 - Usefulness of systematic screening instrument. (Partners: State Government and VMC)
 - Introduction of quality assurance measures at district level management. (Partner: State Government)
 - Facilitating authorization of ECP as an over the counter product and developing ECP manual. (GOI)
 - Institutionalization of OR teaching/training in IIPS, Mumbai and NIHF, Delhi. (IIPS, NIHF)
 - Establishment of the Gender Working Group (GWG) and a GWG website for making gender a significant cross-cutting issue in all health and development activities.

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